

MODEL RISK ASSESSMENT FORM

| Workplace | Chiddingly Primary School | Likelihood (L) | X | Severity (S) |
|---------------------|--|-------------------|--------|--|
| Department | Whole School | Almost Impossible | 1 | Insignificant (minor injury, no time off) |
| Risk Assessor | Kayleigh Vile | Unlikely | 2 | Minor (injury and up to 7 days off) |
| Room/Area | Whole school and Nursery site. | Possible | 3 | Moderate (injury causing more than 7 days off) |
| Activity/Task | Managing Covid-19 in a school setting | Likely | 4 | Major (death or serious injury) |
| Date | 3.3.22 | Almost Certain | 5 | Catastrophic (multiple deaths) |
| Benefit of activity | Allowing opening of school during Covid 19 | Low = 1-8 | Medium | = 9-14 High = 15-25 |

This model document was updated on 3rd March 2022.

It is being kept under review as updated guidance is published by the Government and reviews of the impact of COVID-19 by Public Health England.

Schools should share the results of their risk assessment with their workforce (including local union representatives). If possible, they should consider publishing it on their website to provide transparency of approach to parents, carers and pupils (HSE would expect all employers with over 50 staff to do so).

The DfE latest documents and guidance webpage is being updated regularly

| | e significant, foreseeable, hazards? rs that can cause harm) | Who is at Risk? | Control measures | F | Risk Ratin | g | What additional control measures can be put in place to reduce the risk further? | evise Risk Ratin | g |
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| 1 | Potential transmission to those at higher risk of serious illness from Covid 19 Guidance is available in the Actions for schools during the Coronavirus Outbreak Guidance for people previously considered clinically extremely vulnerable from COVID-19 COVID-19: guidance for people whose immune system means they are at higher risk | All members of school community | The UKHSA helpline will be closing as of 31st March 2022. After this time the DfE Covid 19 helpline is available to answer questions relating to education and childcare settings. Following expert clinical advice and the successful rollout of the COVID-19 vaccine programme, people previously considered to be particularly vulnerable, clinically extremely vulnerable (CEV), and high or higherrisk are not being advised to shield again. Children and young people who were previously identified as being in one of these groups, are advised to continue to follow the guidance contained in Coronavirus: how to stay safe and help prevent the spread. Children and young people over the age of 12 with a weakened immune system should follow DHSC and UKHSA advice for people whose immune system means they are at higher risk from Covid-19. Children and young people previously considered CEV should attend school and should follow the same COVID-19 guidance as the rest of the population. In some circumstances, a child or young person may have received personal advice from their specialist or clinician on additional precautions to take and they should continue to follow that advice. There remains a smaller number of people who, in spite of vaccination, are at higher risk of serious illness from COVID-19. This is due to a weakened immune system (immunosuppressed) or specific other medical conditions and requires enhanced protections such as those offered by antibody and antiviral treatments, additional vaccinations and potentially other non-clinical interventions. See guidance for people whose immune system means they are at higher risk. | 2 | 4 | R × | | S | R |

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| | | Evidence suggests that people of a Black and Minority Ethnic background may be associated with increased vulnerability in relation to Covid-19. Work in partnership with local BAME and/or faith communities to reinforce individual and household risk reduction strategies relevant to the school community PHE review of the impact of Covid-19 on BAME groups The school will continue to assess the health and safety risks to staff and meet their equality duties as per their local procedures. Governors and leaders should pay regard to the wellbeing of all staff including the headteacher. Schools should ensure they have explained to all staff the measures they are proposing putting in place and involve all staff in that process. All pregnant workers must undertake a workplace risk assessment with their employer and/or their occupational health team if they have one. Vaccination is the best way to protect against the known risks of COVID-19 in pregnancy for both women and babies. Further details and the latest advice can be found on the government website: Pregnancy and Coronavirus Pregnant workers should be supported by their employer with appropriate risk mitigations in line with recommendations provided by the workplace risk assessment. Employers should make sure the controls identified by a risk assessment for example adequate ventilation, good hygiene and cleaning, are applied strictly. | | | | |

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| | | | Pregnant workers who continue to come into work should also consider taking lateral flow tests regularly. Individual Covid 19 risk assessments for those staff. Identified above, who remain at higher risk from Covid 19 should continue to be completed/reviewed regularly. Unless they are at higher risk from Covid 19, encourage parents/carers and staff to follow the guidance that applies to everyone. Employers should be able to explain the measures they have in place to keep staff safe at work. The Health and Safety Executive (HSE) has published guidance on protecting vulnerable workers, including advice for employers and employees on how to talk about reducing risks in the workplace. Employers should discuss concerns with staff. Individual risk assessments completed/reviewed regularly for those staff at greater risk from Covid 19. No CEV staff or pupils at CP. 1 staff members previously considered to be CV. Currently, no known pregnant staff at CP. Staff encouraged to speak to KV if concerns regarding individual circumstances | | S | R | | S | | |
| 2 | Risk of ongoing contamination from pupils and staff | All members of the school community | During April 2022, all children aged 5-11 years will be offered the covid-19 vaccine, in line with advice from the Joint Committee on Vaccination and Immunisation (JCVI). Schools should ensure that control measures are in place and well communicated: | 2 | 4 | 8 | | | | |

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| | | Hand hygiene: Frequent and thorough hand cleaning is regular practice. The school ensures that pupils clean their hands regularly with soap and water or hand sanitiser. Ensure sufficient and proportionate handwashing supplies and cleaning materials are available. Where a sink is not nearby, provide hand sanitiser in classrooms and other learning environments. Respiratory hygiene: The 'catch it, bin it, kill it' approach continues to be adhered to in school. Cleaning: Areas and equipment are cleaned regularly with a particular focus on frequently touched surfaces The school follows the government guidance on cleaning of non-healthcare settings. Ventilation: The school will be well ventilated with windows and doors opened to create air flow. CO2 monitors have been provided to all state-funded education settings from September, so staff can quickly identify where ventilation needs to be improved. Any poorly ventilated spaces will be identified in the risk assessment and steps taken to improve fresh air flow in these areas, giving particular consideration to when holding events where visitors such as parents are on site. | | | | |

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| | | Adjust any mechanical ventilation systems to increase the ventilation rate where possible and check to confirm that normal operation meets current guidance and that only fresh outside air is circulated. In the very few cases where an area of poor ventilation (sustained CO2 readings above 1500ppm) has been identified and this cannot be resolved through opening windows and doors or minor repair works, it may be appropriate to consider the use of an air cleaning unit as an additional mitigation whilst further remedial work is undertaken to improve ventilation The Health and Safety Executive guidance on air conditioning and ventilation during the COVID-19 pandemic and CIBSE COVID-19 HYPERLINK "https://www.cibse.org/coronavirus-covid-19"advice provides more information. Contingency plans are in place outlining how the school would operate if there were an outbreak within school or local area. The contingency framework has been updated - Managing coronavirus (COVID-19) in education and childcare settings - GOV.UK (www.gov.uk) The updated framework sets out the updated threshold levels. Should these be met, the school can call the dedicated advice service who will escalate the issue to the local health protection team, where necessary and advise if any additional action is required, such as implementing elements of the contingency plan. | S | R | | S | R |

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| | | From 24 th February 2022 there is no legal requirement for anyone testing positive for Covid-19 to self-isolate. It is, however, recommended for those who test positive to stay at home and avoid contact for at least five full days and then until they have received two negative tests on consecutive days. Communicate to parents that pupils should not come into school if they have symptoms or have had a positive test result. Anyone who develops COVID-19 symptoms, will be sent home and told to follow public health advice. If a pupil is awaiting collection, they should be left in a room on their own if possible and safe to do so. A window should be opened for fresh air ventilation if possible. Appropriate PPE should also be used if close contact is necessary. Further information on this can be found in the Use of PPE in education, childcare and children's social care - GOV.UK (www.gov.uk) guidance. Testing From 24 February, schools should follow the published UKHSA guidance on COVID-19: people with COVID-19 and their contacts - GOV.UK (www.gov.uk). From 1 st April, 2022 the government will end free symptomatic and asymptomatic testing for the general public. Limited symptomatic testing will be available for a small number of at-risk groups. Schools are still able to order tests in response to public health advice. | | | | |

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| | | Further actions for educational settings may be advised by a local Incident Management Team (IMT) investigating a suspected or confirmed case of COVID-19. | | | | |
| | | From 21 February, staff and pupils in mainstream secondary schools will not be expected to continue taking part in regular asymptomatic testing and should follow asymptomatic testing advice for the general population. Further information is available in the NHS get tested for COVID-19) guidance. https://www.nhs.uk/conditions/coronavirus-covid-19/testing/get-tested-for-coronavirus | | | | |
| | | In the event of an outbreak, a school may also be advised by their local health team or director of public health to undertake testing for staff and students of secondary age and above for a period of time. | | | | |
| | | The school will maintain its capacity to deliver high-quality remote education for the next academic year, for pupils who are of compulsory school age and pupils who are below compulsory school age but who would usually be taught in a class with compulsory school aged children (most commonly in a reception class). Including for pupils who are abroad and facing challenges to return due to COVID-19 travel restrictions, for the period they are abroad. | | | | |
| | | The remote education provided should be equivalent in length to the core teaching pupils would receive in school. Schools should work collaboratively with families and put in place reasonable adjustments so that pupils with special educational needs and disabilities (SEND) | | | | |

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| | | can successfully access remote education. Full expectations for remote education, support and resources can be found on this link: https://get-help-with-remote-education.education.gov.uk/ The school will consider combining class groups to ensure pupils remain in school during periods of high teacher absence due to Covid. The Department for Education has also told schools that, where there is a need for remote education, live streaming lessons is the "preferred method". Some pupils may be experiencing a variety of emotions in response to the COVID-19 pandemic, such as anxiety, stress or low mood. The school will access useful links and sources of support on promoting and supporting mental health and wellbeing in schools. Educational visits can continue with risk assessments in place which include systems of controls at the destination. Check the provider has assessed the risk and implemented appropriate control measures. Any attendance restrictions should be reflected in the visits risk assessment and setting leaders should consider carefully if the educational visit is still appropriate and safe. Only students who are attending the setting should go on an educational visit. Education settings should consult the health and safety guidance on educational visits when considering visits. You MUST ensure there is adequate financial protection in place in the event of a COVID-19 cancellation. You MUST consult with your insurers to find out if there are any COVID-19 exceptions. | | | K | | 5 | K |

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| | | Schools should continue to offer wraparound provision, such as breakfast and after-school clubs, for those children eligible to attend school to help support the children of critical workers. Face Coverings Face coverings are no longer advised for pupils, staff and visitors in classrooms or communal areas. Staff and pupils should follow wider advice on face coverings outside of school, including on transport to and from school - Face coverings: when to wear one, exemptions and what makes a good one - GOV.UK (www.gov.uk). A director of public health might advise you that face coverings should temporarily be worn in communal areas or classrooms (by pupils, staff and visitors, unless exempt). You should make sure your contingency plans cover this possibility. Face visors or shields can be worn by those exempt from | L | S | g R | | | ıg |
| | | wearing a face covering but they are not an equivalent alternative in terms of source control of virus transmission. They should only be used after carrying out a risk assessment for the specific situation and should always be cleaned appropriately. In these circumstances, transparent face coverings can also be worn. Transparent face coverings may be effective in reducing the spread of COVID-19. However, the evidence to support this is currently very limited. Leaders MUST ensure that school has enough tissues and bins available to support pupils and staff to follow the 'catch it, kill it, bin it' approach. Reinforce routines of | | | | | | |

| What are the significant, foreseeable, hazards? (the dangers that can cause harm) | Who is at Risk? | Control measures | | Risk Ratin | g | What additional control measures can be put in place to reduce the risk further? | F | evis Risl Ratir | c ng |
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| (the dangers that can cause harm) | INISK! | using a tissue to cough or sneeze and bins for tissue waste. Ensure all the usual building checks are undertaken to make the school safe. Health and Safety, and safeguarding policies and practices kept up to date in line with current DfE guidance. Keep risk assessments under regular review in line with government guidance. Ensure the contingency plan outlines extra action to take if the number of positive cases substantially increases. This is because it could indicate transmission is happening in the setting. The thresholds, detailed below, can be used by settings as an indication for when to seek public health advice if they are concerned. For most education and childcare settings, whichever of these thresholds is reached first: For most settings, it will make sense to think about taking extra action if they face severe operational disruption to face-to-face education.' The thresholds, detailed below, can be used by settings as an indication for when to seek public health advice if they are concerned. For most education and childcare settings, these include: o a higher than previously experienced and/or rapidly increasing number of staff or student absences due to COVID-19 infection evidence of severe disease due to | L | S | R | Teduce the risk fulfiller: | | S | |
| | | COVID-19, for example if a pupil, | | | | | | | |

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| | | | student, child or staff member is admitted to hospital due to COVID-19 o a cluster of cases where there are concerns about the health needs of vulnerable staff or students within the affected group At the point of reaching a threshold (outlined at the top of the document), review and reinforce the testing, hygiene and ventilation measures already in place and consider: • whether any activities could take place outdoors, including exercise, assemblies, or classes • ways to improve ventilation indoors, where this would not significantly impact thermal comfort • one-off enhanced cleaning focussing on touch points and any shared equipment | | S | R | | S | R |
| 3. | Site Safety risks Fire procedures Lockdown Movement for lunch / transitions Toilets Security including risk of theft Data breaches | All members of the school community | SLT lead identified — Kayleigh Vile HOS Continue taking the attendance register and following up any absences in line with statutory guidance. School attendance is mandatory for all pupils of compulsory school age and it is a priority to ensure that as many children as possible regularly attend school. Where a child is self-isolating (awaiting a test result) or in quarantine because of COVID-19, they should be recorded as code X (not attending in circumstances related to coronavirus). Where they are unable to attend because they have a confirmed case of COVID-19 they should be recorded as code I (illness). For pupils abroad who are facing challenges to return, code X is unlikely to apply. In some specific cases, code Y (unable to attend due to exceptional circumstances) will apply. Further guidance about the use of codes is provided in the | 2 | 4 | 8 | | | |

| What are the significant, foreseeable, hazards? (the dangers that can cause harm) | | Who is at Risk? | Control measures | | Risk Ratin | | What additional control measures can be put in place to reduce the risk further? | Revise Risk Ratin | | k ng |
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| | | | school attendance guidance. https://www.gov.uk/government/publications/school-attendance School to follow risk assessments for premises and accessing outside equipment and areas. Toilets to be cleaned regularly and pupils must be encouraged to clean their hands thoroughly after using the toilet. Share any updated fire evacuation information with all staff during daily briefing and with children. Continue with emergency drills as normal to ensure pupils are familiar with the arrangements. 6x per year High expectations of how children move around school upheld by all members of staff. Any incidents are logged, and the risk assessment is evaluated, and changes made as a result of lessons learned. Reconsider e-safety policies and procedures in light of | | 5 | K | | | 5 | K |
| 4. | Risk of transmission between parents and pupils during school drop-off and collection times | All members of the school community | lessons learned during home learning. Any parents who have had a positive test or who are displaying symptoms of COVID-19 should not be attending the school. Schools might consider issuing their own guidelines for Covid-safe behaviour on the premises. Any such guidance should be written up in consultation and collaboration with parents and pupils. Information shared with parents via letter | are are 2 4 8 | | | | | | |
| 5. | Risks of possible transmission to pupils who travel to school by dedicated | Pupils | Face coverings are no longer advised for pupils, staff and visitors in classrooms or communal areas. Staff and pupils should follow wider advice on face coverings outside of school, including on transport to and from | 1 | 4 | 4 | | | | |

| What are the significant, foreseeable, hazards? (the dangers that can cause harm) | | Who is at Risk? | Control measures | | Risk Ratin | | What additional control measures can be put in place to reduce the risk further? | evise Risk Ratin S | g |
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| | school transport (including statutory provision) or wider public transport The Actions for schools during the Coronavirus Outbreak details the framework for transporting pupils | | school - Face coverings: when to wear one, exemptions and what makes a good one - GOV.UK (www.gov.uk). Dedicated school transport (including statutory provision) Liaise with the transport hub and check that they are fully aware of the health and safety procedures. mainstream-transport.cts@eastsussex.gov.uk No children currently travel on public or dedicated | | | | | | |
| 6. | Risk of ongoing contamination from people (staff, parents/carers, visitors, contractors and/or deliveries) coming into school | All members of the school community | Ensure contractors, school meal providers, milk providers and fruit providers can fulfil all risk assessment requirements. Communicate clearly that anyone displaying symptoms of COVID-19 should not attend school and arrange to take a PCR test as soon as possible. Make arrangements for strict handwashing/sanitising procedures in place as soon as pupils/staff/visitors/contractors arrive in school. Volunteers and visitors are welcome to visit schools but should be made aware of the control measures. Before visitors attend performances or sporting events, the school will encourage them to self-assess for symptoms of coronavirus (COVID-19). These are: • a high temperature • a new, continuous cough a loss of, or change to, your sense of smell or taste | 2 | 4 | 8 | | | |

| What are the significant, foreseeable, hazards? (the dangers that can cause harm) | | Who is at Risk? | Control measures | | Risk Rating | | What additional control measures can be put in place to reduce the risk further? | | Revised Risk Rating | | |
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| | | | If outbreak at the site, non-essential visitors and volunteers will not attend site during school hours. Essential visitors, contractors and volunteers will be informed of the outbreak prior to attending site. | _ | 3 | ı | | | 3 | | |
| 7. | Risk that contamination exists within the school environment due to ineffective hygiene measures. | All members of the school community | Regular cleaning should take place of equipment and areas. Risk assessment to identify any areas where cleaning should be more frequent. Enhanced cleaning schedule in place to ensure effective hygiene standards comply with latest guidance - cleaning of non-healthcare settings. All handwashing sinks, soap dispensers, hand gel etc. are checked daily to ensure stock levels are adequate. School leaders to inspect daily to ensure good/effective hygiene levels. | 2 | 4 | 8 | | | | | |
| 8. | Risk of transmission from pupils and staff who have been in contact with the virus and/or are showing signs of having the virus (a new, continuous cough or a high temperature) | All members of the school community | Follow and localise guidance from DfE - Testing In Education Settings - Google Drive. If a pupil is awaiting collection, they should be left in a room on their own if possible and safe to do so. A window should be opened for fresh air ventilation if possible. Appropriate PPE should also be used if close contact is necessary. Further information on this can be found in the use of PPE in education, childcare and children's social care settings guidance. Any rooms they use should be cleaned after they have left. Headteachers should communicate to staff that if they are displaying symptoms they should be tested 'as soon as practicably possible.' | 2 | 4 | 8 | | | | | |

| | significant, foreseeable, hazards? s that can cause harm) | Who is at Risk? | Control measures | Risk Rating | | | What additional control measures can be put in place to reduce the risk further? | | Revised Risk Rating | |
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| | | | Positive cases and symptoms Public health advice for People with COVID-19 and their contacts changed from 24 February 2022. Contacts are no longer required to self-isolate or advised to take daily tests, and contact tracing has ended. | | | | | | | |
| | | | Seek public health advice if a pupil, student, child or staff member is admitted to hospital with COVID-19. Hospitalisation could indicate increased severity of illness or a new variant of concern. Settings may be offered public health support in managing risk assessments and communicating with staff and parents. | | | | | | | |
| 9. | Contingency planning | All pupils and staff | The contingency framework has been updated - Managing coronavirus (COVID-19) in education and childcare settings - GOV.UK (www.gov.uk). | 2 | 4 | 8 | | | | |

Action Plan (when will the above additional control measures be implemented and by whom?)

| Action | By Whom? | Deadline | Date Completed |
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| Update contingency plan | Jb. | 18.3.22 | |
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Signature and review

| Name of Manager: | James Procter Alan Brundle | Signature of Manager: | Alan Donale J. Profer | Date: | 3.3.22 |
|---------------------------------------|-----------------------------|-----------------------|-----------------------|-------|--------|
| 1 st review undertaken on: | | Signature of Manager: | | Date: | |
| 2 nd review undertaken on: | | Signature of Manager: | | Date: | |

| 3 rd review undertaken on: | Signature of Manager: | Date: | |
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